

Application Data Sheet**Application Information**

Application number::	
Filing Date::	
Application Type::	Regular (371 National Entry)
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	Yes – Sequence Listing Transfer
Computer Readable Form (CRF)?::	<u>Yes</u>
Number of copies of CRF::	
Title::	METHODS FOR DIAGNOSIS AND PROGNOSIS OF CANCERS OF EPITHELIAL ORIGIN
Attorney Docket Number::	701039-054482 <u>CMC-011</u>
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	7
Small Entity?::	Yes
Latin name::	
Variety denomination name::	
Petition included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract of Grant Numbers::	
Secrecy Order in Parent App.?::	No

APPLICANT INFORMATION

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Marsha
Middle Name::	A.
Family Name::	Moses
Name Suffix::	
City of Residence::	Brookline
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	64 Dean Road
City of mailing address::	Brookline
State or Province of mailing address::	MA
Country of mailing address::	US
Postal or Zip Code of mailing address::	02445
Applicant Authority Type::	Inventor
Primary Citizenship Country::	IN
Status::	Full Capacity
Given Name::	Roopali
Middle Name::	
Family Name::	Roy
Name Suffix::	
City of Residence::	<u>Attleboro</u> <u>Newton</u>
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	<u>300 O'Neil Blvd., Apt#6</u> <u>412 Langley Road,</u> <u>Apt#7</u>

City of mailing address::	Attleboro <u>Newton</u>	
State or Province of mailing address::	MA	
Country of mailing address::	US	
Postal or Zip Code of mailing address::	02703-6124 <u>02459</u>	
Correspondence Information		
Correspondence Customer Number::	60828 <u>051414</u>	
Name::	David S. Resnick <u>Patent Administrator</u> Nixon-Peabody LLP <u>Goodwin Procter LLP</u>	
Street of mailing address::	400 Summer Street <u>Exchange Place</u>	
City of mailing address::	Boston	
State or Province of mailing address::	MA	
Country of mailing address::	US	
Postal or Zip Code of mailing address::	02110-2134 <u>02109</u>	
Phone number::	(617)-345-1000 X6057 <u>617-570-1000</u>	
Fax number::	(617)-345-1300 <u>617-523-1231</u>	
E-Mail address::	dresnick@nixonpeabody.com EPitcher@goodwinprocter.com	
Representative Information		
Representative Customer Number::	60828 <u>051414</u>	
Or		
Representative Designation::	Registration Number::	Representative Name::
Attorney of Record	30,628	Ronald I. Eisenstein
Attorney of Record	34,236	David S. Resnick
Agent	L0207	Leena H. Karttunen
Agent	58,109	Candace M. Summerford
Attorney	30,727	Michael L. Goldman

Domestic Priority Information			
Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	371 National Stage of	PCT/US2005/000714	01/10/05
PCT/US2005/000714	An application claiming benefit under 35 USC 119(e)	60/535,306	1/9/04
Foreign Priority Information			
Country::	Application number::	Filing Date::	Priority Claimed::
Assignee Information			
Assignee name::	Children's Medical Center Corporation		
Street of mailing address::	55 Shattuck Street		
City of mailing address::	Boston		
State or Province of mailing address::	MA		
Country of mailing address::	US		
Postal or Zip Code of mailing address::	02115		